🦀 💮 🐔

CLAIMS ONLY								Application	Number		Filin	g Date		
								Application Number Filing Date						
								Applicant(s	70	101				
							Applicant(S	•)						
		* May be used for additional claims or amendments												
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT				*		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend	ı		Indep	Depend	Indep	Depend	Indep	Depend
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<u>3</u>								53 54						
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50		i i		<u> </u>				100						
Total	a	1						Total				11		
Indep Total	4	<u>'</u>	<u> </u>					Indep Total	4	<u>'</u>				
Depend	5							Depend				<u> </u>		
Total Claims	56							Total Claims						